

**REPORT TO: HEALTH AND SOCIAL CARE SERVICES COMMITTEE ON
5 JUNE 2013**

**SUBJECT: COMMUNITY CARE & CRIMINAL JUSTICE PERFORMANCE
REPORT – QUARTER 4 JANUARY – MARCH 2013**

BY: CORPORATE DIRECTOR (EDUCATION AND SOCIAL CARE)

1. REASON FOR REPORT

- 1.1 The purpose of this report is to outline the performance of the service for the period from 1 January to 31 March 2013.
- 1.2 This report is submitted to Committee in terms of Section III (E) (1) of the Council's Administrative Scheme relating to the exercise of the function of the Council as Social Work Authority under the Social Work (Scotland) Act 1968.

2. RECOMMENDATION

2.1 It is recommended that the Health and Social Care Services Committee:

- (i) **Scrutinises performance outlined in this report in relation to the Performance Indicator Report, Service Improvement Plan, Complaints and the Improvement Action Plan (SCSWIS); and**
- (ii) **Considers and notes the actions being taken to seek improvements where required.**

3. BACKGROUND

- 3.1 Following the Community Care restructure, the Health and Social Care Services Committee approved the adoption of the Community Care and Criminal Justice performance indicators for 2012/13 on 23 May 2012 (item 5 of the minute refers).
- 3.2 Service Plans are a key element of the Moray Council Performance Management Framework and contain departmental objectives derived from a number of sources including the Efficient Government Requirements, the Best Value Review Plan, the Public Service Improvement Framework (PSIF) process and the specific Corporate Development Plan objectives that impact Community Care. On 8th August 2012, the Health and Social Care Services Committee approved the adoption of the Community Care Service Plan 2012-2013 (para 6 of the minute refers). The Criminal Justice Service Plan will be reported along with 'Children and Families' as much of their work this year is focused on under 18s.
- 3.3 Performance against all Community Care and Criminal Justice performance indicators; progress against the outcomes and milestones relating to the Community Care Service Plan; and targets for Complaints acknowledged and responded to are included in the 2012/13 Quarter 4 Performance Monitoring Statement.

- 3.4 Following the approval of the Moray Adult Community Care Improvement Action Plan by this Committee, which was developed in response to the Care Inspectorate Scrutiny Report (July 2011), (formerly Social Care and Social Work Improvement Scotland (SCSWIS)), this report provides an up-date on progress for quarter 4 by exception. A copy of the Care Inspectorate (SCSWIS) Action Plan Up-date is available on the members' portal.

4. **PERFORMANCE INDICATORS**

SUMMARY OF PERFORMANCE

- 4.1 Performance against indicators relevant to the quarter is presented across seven objectives/service areas and involves 20 indicators with targets and 8 Data only / Annual indicators. At the end of this quarter, 60% are regarded as performing well and 25% require close monitoring while 15% require action if the target is to be met.

The table below summarises the performance against the indicators to 31 March 2013.

Service/Objective	No. of Indicators	Green - Performing Well	Amber - Close Monitoring	Red - Action Required	Annual Pls / Data Only
Access to Community Care Services	4		1	2	1
Re-ablement and Home Care	6	1	1		4
Fieldwork Teams	6	3	2	1	
Drug and Alcohol	3	3			
Community Mental Health	4	2			2
Specialist Support Services - Learning Disability	3	2			1
Criminal Justice	2	1	1		
Total	28	12 (43%)	5 (18%)	3 (11%)	8 (28%)
% Total – Quarter 4	20	60%	25%	15%	

PERFORMANCE ANALYSIS - AREAS OF GOOD PERFORMANCE

Access to Community Care Services

- 4.2 “% of service users receiving a service within 28 days of assessment” – *Service Standard*

For this reporting period all 66 service users (100%) received a service within the target 28 days. This compares to 93.75% in the previous quarter. With the exception of quarter 3, performance against this measure has been at 100%.

Re-ablement and Home Care

- 4.3 “% of service users reporting that they are satisfied with Occupational Therapy equipment provision”- *Service Outcome*

This quarter all 14 responders were satisfied or very satisfied with the equipment provision. Previously it was acknowledged that the sample size required to be increased if this service outcome was to be considered meaningful and this quarter has seen the highest number of responders to date.

Fieldwork Teams

- 4.4 “% of carers satisfied with their involvement in the design of the care package” – *Local Indicators*

“% of carers who feel supported and capable to continue their role as a carer” – *Local Indicators*

As part of the care plan review process, in quarter 4, 154 out of 155 carers (99.35% against a target of 90%) said they were satisfied with their involvement in the design of the care package and 139 out of 152 (91.45% against a target of 90%) felt supported and capable to continue their role as a carer.

- 4.5 “Number of people supported (over 18) securing a personal budget” – *Local Indicator*

Committee will note that despite the number of Direct Payments clients remaining fairly static the number of service users securing a personal budget has increased from an average of 63 for quarter 3 to 79 for quarter 4. Against an annual target of 38, there were 87 individuals receiving a personal budget and 66 individuals with a service in place using this mechanism at the end of March 2013. Therefore across both of these options, there is an increased up-take of self directed support.

Drug and Alcohol

- 4.6 “% of assessments offered within 72 hours of referral receipt” – *Service Outcome*

Committee will recall it was not possible to report on this measure for quarters 1 and 2. In quarter 3 the percentage of assessments offered within this timescale was 98.04% against a target of 100%. In quarter 4 the target has been met with all 57 clients offered an assessment within 72 hours of receiving a referral. Officers and Studio 8 partners worked together to achieve this service outcome.

- 4.7 “% of service users will receive a first treatment appointment within 5 weeks from referral” – *Service Standard*

This measure was introduced for the first time this year and seeks to improve the level of satisfaction by providing a prompt response when support is needed. In quarter 4, 100% (all 121 clients) received a first treatment appointment within 5 weeks from referral. The measure has shown continuous improvement since achieving 91.85% in its first quarter.

- 4.8 “% of families reporting that they have a drug and alcohol problem offered support through pregnancy and the early years of parenthood” – *Service Standard*

During 2012-13 a total of 217 families (100%) were offered this type of support.

Community Mental Health

- 4.9 “% of Mental Health Carers offered an assessment within 28 days.” – *Service Standard*

Throughout 2012-13 all carers were offered a referral to Quarriers, for the purpose of a carers’ assessment, within 28 days of being identified as a carer. In quarters 3 & 4 this included 20 carers.

- 4.10 “% care plans completed within 8 weeks from the end date of assessment.” – *Service Standard*

Service users are involved from the outset in all discussions and in the development of their care plans. This is evidenced in supervision sessions and the care plans recorded on Carefirst. In quarters 3 & 4 all 65 care plans were completed within 8 weeks from the end date of assessment.

Specialist Support Services – Learning Disability

- 4.11 “% of children for whom it is planned that they leave school in the 2012/13 academic year who are known to the transitions panel and have a transitions plan in place”.

A total of 21 young people went through the transition process during 2012-13. The families of two of these young people declined having a transitions plan developed and 1 young person was based out-with Moray, however of the remaining 18 young people, all had a transition plan in place.

- 4.12 “% of new Learning Disability carers offered an assessment” – *Service Outcome*

In quarter 1, there were no new learning disability carers. In quarters 2, 3 and 4 there was a total of 5 new carers all of which were offered an assessment.

- 4.13 “Number of people with a Learning Disability in employment or preparing for employment” (data only) – *Service Outcome*

For quarter 4, there were 64 service users with a ‘learning disability’ and 34 with an ‘autistic spectrum disorder’ who were either in employment or preparing for employment. By the service striving to improve opportunities for inclusion, there were 23 Learning Disability (LD) and 12 Autistic Spectrum Disorder (ASD) service users in paid employment, 14 LD and 4 ASD in

voluntary work, and 27 LD and 18 ASD were at different stages of preparing for employment.

Criminal Justice

4.14 “% of social enquiry reports submitted to courts by the due date” – *Service Standard*

Since quarter 2 of 2007/08 all social enquiry reports have been submitted by the due dates and in 2012-13 a total of 262 reports have been submitted.

AREAS OF PERFORMANCE IDENTIFIED FOR IMPROVEMENT AND HOW THIS WILL BE ACHIEVED

Access to Community Care Services

4.15 “% of referrals categorised as critical/substantial processed within 24 hours” – *Service Standard*

There were 275 referrals made which were categorised as critical/substantial in quarter 4 of which 169 were processed within the 24 hour service standard giving 61.45% against a target of 100%.

4.16 “% of referrals categorised as moderate and low processed within 7 days” – *Service Standard*

There were 167 referrals made which were categorised as moderate/low in quarter 4 of which 136 were processed within the 7 day service standard giving 81.44% against a target of 100%.

4.17 As reported in quarter 3, the reasons for not meeting the service standards for referrals were not restricted to the deployment of additional resources to the Access Service but as detailed in a separate report submitted to this Committee on 10 April 2013 (Item 9 of Agenda refers) required the development of a new model for delivering adult community care services. Following the approval of this draft policy at this meeting, Officers are currently in the process of consulting on this draft policy with a range of different stakeholder and partner organisations prior to resubmitting to this Committee for approval.

4.18 “Number of hospital patients discharged to a community based setting out-with 28 days” – *Service Outcome (data only)*

Committee will recall, from previous performance reports, that the national 2012-13 HEAT target is 6 weeks but will be moving to a 4 week national standard in 2013/14. In preparation for the adoption of this new target, Committee agreed to monitor performance against this more demanding service standard a year in advance as a data only target. This would support Officer and health colleagues to be proactive in identifying what action-if any- is required to meet this target in 2013/14. For this quarter, 4 people had to wait over 4 weeks to be discharged and this included one person waiting over the current national target of 6 weeks. In relation to the individual waiting over 6 weeks, Committee will note that this was due to the individual wishing to be

placed at a specific care home and therefore choosing to decline other care home options offered.

- 4.19 Of the remaining 3 individuals, a delay occurred due to unpreventable legal/financial issues and other issues out-with the control of social and health care colleagues. Committee will note that the reasons for any delay in discharge are scrutinized closely by the Health and Social Care Partnership.

Re-ablement and Home Care

- 4.20 “To achieve a cumulative annual saving of £160,000 through the reduction in service user care package hours through the successful deployment of a re-ablement approach to care” – *Service outcome*

As mentioned in the previous report to this Committee (10 April 2013), it was agreed that a calculation of the full financial benefits of re-ablement for 2012/13 could only be ascertained at the end of quarter 4 of this reporting cycle. This information is presently being verified, and it is now proposed to report this figure as part of the quarter 1 performance report to this Committee.

- 4.21 “Proportion of home care service users 65+ receiving an intensive care package” - *Service Outcome*

The proportion of home care service users 65+ receiving an intensive care package has risen from 30.82% in 2010/11 to 31.88% (329 out of 1032) in quarter 4. Despite meeting and then exceeding the target in quarters 1 and 2, the service has not been able to achieve this target for the last 2 quarters. Committee will however note that in recent years the proportion of older people receiving 10+ hrs of intensive home care has risen also from 28.3% in 2003 to 39.8% in March 2012 (a difference of 11.5%). Through continuing to adopt this target, Moray Adult Community Care Services, will aim to achieve this target through a broad range of improvement activities in 2013/14.

Fieldwork Teams

- 4.22 “% of Care Plans agreed within 7 days from the completion of the assessment” – *Service Standard*

In relation to this service standard, 17 of the 20 people in quarter 4 had their care plans agreed within this timescale. Of the remaining 3 service users, the service standard was narrowly missed. It is the expectation that new online forms (on the care first recording information system) will provide a more streamlined process for data input and the completion of care plans. These new forms came into effect on 1 May 2013.

- 4.23 “Proportion of service users 65+ in permanent care (as a percentage of the overall number of people receiving care)” – *Service Outcome*

The above service outcome was developed as a key indicator in terms of measuring the shift in the balance of care of people living independently in their own home with support in relation to the number of people in permanent care. It was the aim to have reduced the proportion of people in permanent care from nearly 33% to 31% by the end of the financial year. The level of

performance stood at 33.33% for quarter 4 with 516 clients out of 1548 in a permanent care setting. This data indicates a return to the level achieved in quarter 1 and demonstrates the challenges presented to the health and social care system of an aging demographic including more elderly people living longer with complex care needs. Committee should also note that Moray (with a rate of 30.52 per 1,000) is currently below the Scottish average (34.33) rate per 1000 population aged 65+ for Older People supported in a care home in 2011/12. Despite not meeting the 31% target, Moray's is nevertheless performing strongly against other areas in Scotland.

- 4.24 “Number of people (over 18) using Direct Payments” – *Local Indicator*
Direct Payments is one of a number of self-directed support options which are available to our service users. There has been little change in the Direct Payments client numbers over the last five quarters (staying around 105 – 106 against a target of 115). However there has been a significant increase in the number of people choosing a personal budget so Officers consider that significant progress has been made in progressing Self-Directed Support in Moray in anticipation of the Self-Directed Support Act (2013) coming into force.

Community Mental Health

- 4.25 “Increase the number of mental health respite hours for informal mental health carers” – *Service Standard (Data only)*
While the numbers for the first two quarters are low, with 3 days (30 hours) in quarter 1, rising to 7 days (70 hrs) in quarter 2, the hours recorded for quarters 3 and 4 were 0. Several cases have been identified where respite care may be appropriate to relieve a carer. However for the following reasons this has been unable to be progressed:
- a lack of suitable respite accommodation being available
 - the financial implications of planned respite care have resulted in respite care being declined by both service users and carers
 - service users have to agree to any service provided by the Local Authority including respite care which can present as an obstacle
- 4.26 It should also be noted that what is termed ‘befriending support’ which, in many circumstances, can provide respite to a carer, is not included in relation to this measure. Nevertheless, Adult Community Care Services acknowledge that respite for mental health carers is an area for improvement and are undertaking the following actions:
- A memo has been issued to the Community Mental Health Team to clarify what constitutes the delivery of respite to a carer, in order to reduce incidence of support being categorised differently and to ensure a common understanding of unpaid care and respite support across all areas of Community Care.
 - Variations are being considered to existing commissioned services to support the improvement of respite delivery within Moray.
 - A pilot of Mental Health Service Users to access their support through Self-Directed Support will include a proportion of those who either currently access respite or who would want to.

- 4.27 The recent investment approved by Committee resulting in the appointment of additional members of staff within the team is intended to have a positive impact on performance in relation to this measure. This will also be in addition to an ongoing programme of awareness raising sessions with the team to promote wider and more creative ideas for respite and to enable them to be more confident in their commissioning and recording of respite.

Criminal Justice

- 4.28 “% of new probationers seen by a supervising officer within one week” – *Service Standard*
In 2012-13 a total of 82 (98.79%) of the 83 new probationers were seen by a supervising officer within one week against a target of 100% compared to a total of 79 (98.75%) of 80 new probationers in 2011-12.

5. **SERVICE PLAN**

SUMMARY OF PERFORMANCE / PERFORMANCE ANALYSIS - AREAS OF GOOD PERFORMANCE

- 5.1 At the end of quarter 4, of the 103 objective milestones in the service plan 101 were due to be completed. The remaining 2 milestones were due at the end of April. Although the plan was behind on 13 of these milestones (details below), a total of 90 milestones have been completed and others are well advanced. Overall the Community Care Service Plan was over 87% complete at the end of quarter 4. The functions with no outstanding milestones are: Home Care; External Day Services; Transitions; Mental Health; Challenging Behaviour; Disability Living Centre; Housing Support; Drug and Alcohol; and Commissioning & Improvement.

AREAS OF PERFORMANCE IDENTIFIED FOR IMPROVEMENT AND HOW THIS WILL BE ACHIEVED

Day Service

- 5.2 Of the 8 milestones for this function, all were due to be completed by the end of quarter four and 6 have been completed. The remaining 2 were:
- Service user, family and carer consultations completed on the day care service accommodation plan
- 5.3 This milestone relates to the Keith Resource Centre. The accommodation plan proposes that this facility could be developed as a community resource which would offer additional support to older people and their carers during the evenings and weekends. Further information concerning this specific initiative and the general development of adult day care services across Moray was outlined in a separate report which was submitted to, and approved by, this Committee (on April 10 2013 – ‘Adult Day Services’, agenda

item 11 refers). It is proposed that this milestone will be carried forward as part of the 2013/14 Service Plan.

5.4 One other milestone within Day Service (due in April) namely:

- Post consultation, apply for building consent in relation to relevant day care service buildings

5.5 As noted in the Integrated Day Care Service Phase 1 Review (available via Design Better Services portal); building consent is no longer required as service user outcomes can now be achieved without structural changes to the building.

Moray Employment Support and Training

5.6 Of the 8 milestones for this function, 8 were due to be completed and 6 have been completed. The remaining 2 were:

- Train all staff to be able to support 'Training for Work'
- Subject to securing funding, deliver the first 'Training for Work' programme

5.7 From the end of March 2013 'Training for Work' came to an end. However staff may need to be trained in the requirements of the new 'Employability Fund' which replaces the above initiative. This is the reason why the above 2 milestones were not completed.

Respite

5.8 Of the 6 milestones for this function, all were due to be completed and 3 have been completed. The remaining 3 were:

- Carers Supported Self Assessment & Review Tool Kit developed
- Specialist Interdependent Carer Assessment Tool Kit developed
- Interdependent Respite Service established

5.9 The first two milestones were initially put on hold due to the review of the core pathway assessment, support and review forms which were being developed and have recently been implemented. They have further been put on hold due to the national consultation regarding Carer Assessments and their role in the delivery of Self Directed Support for Carers. It is proposed that these milestones will be carried forward as part of the service plan for 2013/14. While work on the Interdependent Respite development is still at an early stage of development, the initial focus has been to identify potential providers. The intention is to build capacity within respite delivery as a whole that will include a greater availability to meet the needs of interdependent caring couples. This work will continue and initial results of the scoping and development year will be completed by the end of September 2013.

External Home Care

5.10 Of the 4 milestones for this function, all were due to be completed and 3 have been completed. The remaining 1 was:

- Establish the target for the increased number of hours that will be delivered by external homecare for 2013/14.

5.11 This milestone was 80% completed in quarter 2 having established the ratio of care as 30:70 with 30 being external and 70 internally provided at the end of quarter 2. However as previously reported to the Health and Social Services Committee, as of 31 March 2012, Momentum informed Adult Community Care Services that they would no longer be offering an external homecare service in Moray. Since then, Allied are providing weekly reports of care availability from March 2013. Monthly meetings with Allied were established in March 2013 with a focus on increasing capacity. There will be a new target for Allied following their takeover of Momentum which will be negotiated by June 2013.

Occupational Therapy

5.12 Of the 4 milestones for this function, all were due to be completed and 3 have been completed. The remaining 1 was:

- Produce a new policy for OT's in relation to adaptations and equipment

5.13 The first draft has been completed and after consideration by the Community Care Managers Group, it was agreed that the draft policy would benefit from further consultations with a range of stakeholders before being submitted to Committee for consideration. It is now proposed to submit to the Health and Social Care Services Committee in quarter 3 of 2013/14.

Autism

5.14 Of the 7 milestones for this function, all were due to be completed and 6 have been completed. The remaining 1 was:

- Case files in respect of service users with autism audited in line with Quality Assurance Programme

5.15 The Audit is underway (currently 50% completed) and the findings are due to be reported to the Practice Governance Board Meeting in June 2013.

Self-Directed Support (SDS)

5.16 Of the 6 milestones for this function, 5 were due to be completed and 4 have been completed. The remaining 1 was:

- Following the passing of the SDS Bill by the Scottish Parliament, review carers assessment and develop direct payments for carers

- 5.17 The SDS Bill is not due to be passed by the Scottish Parliament until spring 2013. It is therefore proposed that the completion of this milestone is deferred until June 2013.
- 5.18 Relating to this milestone a further milestone was due for completion by the end of April 2013. This was to:
- Deliver training and information sessions to Quarriers, other providers and the independent sector regarding the impact of SDS
- 5.19 Although it had not been possible to fill the project officer's post by the planned date of August 2012, the post was nevertheless filled by end of January 2013. Consequently the completion of this milestone was consequently 5 months behind schedule. Therefore it is proposed that the completion of this milestone will be incorporated within the service plan 2013/14.

Consultant Practitioners

- 5.20 Of the 7 milestones for this function, all were due to be completed and 6 have been completed. The remaining 1 was:
- Multi-agency auditing of Adult Support Protection files
- 5.21 The audit panel and audit tool have been agreed and the multi agency work is on-going with the intention to complete this by August 2013. It is currently 80% complete.

6. COMPLAINTS

- 6.1 During quarter four, 17 new Stage 1 complaints were received by Community Care, including 4 MSP enquiries. Of these, 9 were responded to within the target 20 working days (53% against a target of 85%). Of those not responded to within 20 says, contact was made either by telephone or holding letter in 3 cases, the other 5 complaints were resolved within 26 days. A total of 6 were upheld and 4 were part upheld. No complaints were escalated to Stage 2 or to the Complaints Review Committee or to the Ombudsman.
- 6.2 No complaints were received by Criminal Justice.
- 6.3 Details of actions taken in respect of upheld or part upheld complaints are given in the 2012-13 Quarter 4 Performance Monitoring Statement.

7. CARE INSPECTORATE (SCSWIS) IMPROVEMENT ACTION PLAN

7.1 As part of the SCSWIS Improvement Action Plan for quarter 4 (2012/13), out of the 42 actions which were due for completion by the end of this quarter, there is one outstanding action relating to the Learning Strategy, namely:

- Learning Disability Commissioning Strategy Submitted to Health & Social Care Committee Approval

7.2 The delay in meeting the deadline for this milestone was due to providing longer than originally planned for consultation on the Learning Disability Commissioning Strategy.

7.3 A copy of the Care Inspectorate (SCSWIS) Action Plan Up-date is available on the members' portal.

8. SUMMARY OF IMPLICATIONS

(a) Council / Community Planning Priorities

This report is in line with National Priority 6 'we live longer healthier lives and Community Planning priority 1, 'healthier citizens'.

(b) Policy and Legal

This report covers the selected national indicators reported to the Scottish Government and Audit Scotland and should be considered in accordance with the statutory duties contained under section 12A of the Social Work (Scotland) Act 1968.

(c) Financial implications

None

(d) Risk Implications

None

(e) Staffing Implications

None

(f) Property

None

(g) Equalities

None

(h) Consultations

Consultation has taken place with the Head of Community Care, Specialist Services Manager, Commissioning Manager, Service Manager (Assessment & Care), Provider Service Manager and Criminal Justice and Lead System Managers who are in agreement with the information as set out in this report.

9. CONCLUSION

- 9.1 Of the performance indicators due to be reported in this quarter 60% were performing well, 25% required close monitoring and 15% require action if targets are to be met.**
- 9.2 In relation to the Service Plan, 101 milestones were due to be completed by quarter 4, 90 have been completed and other actions have made significant progress. Overall the Community Care Service Plan was over 87% complete at the end of March 2013.**
- 9.3 In relation to complaints, action has been taken in respect of all the complaints.**
- 9.4 In relation to the SCSWIS Improvement Action Plan (quarter 4), of the 42 actions due for completion by the end of this quarter there was one outstanding action.**
- 9.5 That Committee scrutinises performance outlined in this report, notes the actions being taken to seek improvements where required.**

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